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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Open to Public Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

- Der	e partment o	f the Treasury	benefit trust or private foundation)	1)		Open to Public				
Inte	rnal Rever	Inspection								
₩ A	For the	2008 calen								
	Check if	C	dar year, or tax year beginning and end Name of organization		D Employer identific	ntion number				
tă p	applicable	Please	MEZ MOUNTAINS ELECTRIC COOPERATIVE,		D Employer Identific	ation number				
≗ [Addres	- Liabal or i	· · · · · · · · · · · · · · · · · · ·	'						
Z	change		NC.		05.00	00061				
<u> </u>	lchange lnitial	' I " ⊢	Doing Business As			98061				
Ļ	return			om/suite	E Telephone number					
Ļ	Termin	Instruc- PC	D BOX 128		505-7	<u> 53-2105</u>				
וַ	Amend return	led tions	City or town, state or country, and ZIP + 4		G Gross receipts \$	<u>39,430,834.</u>				
L	Application pending	* E	SPANOLA, NM 87532		H(a) Is this a group ret					
	pendii	F Name	and address of principal officer:WAYNE SOWELL		for affiliates?	Yes X No				
			AS C ABOVE		H(b) Are all affiliates incli	ıded? Yes No				
ı	Tax-exe	empt status	X 501(c) (12) ◀ (insert no) 4947(a)(1) or 527			st (see instructions)				
			.JEMEZCOOP.ORG		H(c) Group exemption					
			X Corporation	1 Year o		State of legal domicile: NM				
	art I	Summan		1 2 . 00 0		0.000				
-			be the organization's mission or most significant activities: ELECTR	פדר זו	TILTTY COOPE	RATIVE WHO				
2013 Regionales & Governance			ES ELECTRIC SERVICES TO ITS CUSTOMER		TIBITI COOTI	MATTVE WITO				
7	2		ox If the organization discontinued its operations or disposed		than 250/ of to coosts					
Š	2			a or more	1 _ 1	10				
ي	3	Number of vo	oting members of the governing body (Part VI, line 1a)		3	10				
oč	4	Number of in	dependent voting members of the governing body (Part Vollage 15)	JNIT	4	100				
9	5	rotal number	r or employees (Part V, line Za)	/ED	5	122				
	6	Total number	r of volunteers (estimate if necessary)		6	0				
2.5	7a	Total gross u	inrelated business revenue from Part VIII, line 12, column (APR 09 2	2 643	7a	0.				
2	b	Net unrelated	d business taxable income from Form 990-T, line 34	2010	7b	0.				
€3			TPR BRAN	\CH_	Prior Year	Current Year				
	8	Contributions	s and grants (Part VIII, line 1h) OGDE							
©≥a	9	Program sen	vice revenue (Part VIII, line 2g)	.,	35,412,097.	39,040,096.				
	10	Investment ir	ncome (Part VIII, column (A), lines 3, 4, and 7d)		160,841.	198,646.				
-	11	Other revenu	re (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		94,650.	135,210.				
			e - add मिर्नेड हैं through में (must equal Part VIII, column (A), line 12)		35,667,588.	39,373,952.				
SCANNED	13		similar amounts paid (Part IX, column (A), lines 1-3)							
<u>Z</u>	14		to or for members (Part IX, cdifmin (A), line 4)							
\$,	15	Salaries other	ercompensation, em2019e benefits (Part IX, column (A), lines 5-10)		1,382,141.	1,395,628.				
283	162	Professional	fundraising fees (Part IX, column (A), line 11e)		2,002,2121	2705570201				
6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		Total fundra	sing Property (Part IX, column 1) line 35)							
L L	[] ₁₇ [Other expen	sing (Spenses (Part IX, column (D), line 25) ses (Part-IX, column (A), lines 11a-11d, 11f-24f)		33,292,726.	36,435,537.				
	1,0	Total avagas	res. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	34,674,867.	37,831,165.				
				<u> </u>	992,721.	1,542,787.				
_	<u>၂19</u>	Revenue les	s expenses Subtract line 18 from line 12							
]Net Assets or	S S		(D. 1)(10)		Beginning of Year	End of Year				
SSe	일 20		(Part X, line 16)	-	72,668,191.	85,833,168.				
et A	일 21		es (Part X, line 26)		47,069,625.	55,864,368.				
2	리 22		r fund balances Subtract line 21 from line 20		<u>25,598,566.</u>	<u> 29,968,800.</u>				
<u> </u>	art II	Signatu								
		Under penalties and complete (of perjury, I declare that I have examined this return, including accompanying schedules and st Declaration of preparer (other than officer) is based on all information of which preparer has any k	statements, a knowledge	and to the best of my knowledg	e and belief, it is true, correct,				
			- 0	_						
Si	gn	Los	mari Lau		4/1/	<u>'3</u>				
He	ere	Signatu	ire of officer		Date / /					
		:Clo	long Seneral Minian							
		Type or	prioname and title							
_		Preparer's	Date			's identifying number				
signature										
	eparer's	Firm's name (or		1 2.11	EIN ►	NA				
Us	e Only	yours if self-employed),				·				
		address, and ZIP + 4	ALBUQUERQUE, NM 87110		Phone no - / I	505)878-7200				
8.4	av the II	L	nis return with the preparer shown above? (see instructions)		T HOUSE HO.					
			For Privacy Act and Paperwork Reduction Act Notice, see the sepa			X Yes No Form 990 (2008)				
63	2001 12-1	0-00 LII/	TO THE SEPTIMENT OF THE PROPERTY OF THE SEPTIMENT OF THE	ai ate insi	น นติเเบทธ.	FUITH 330 (2008)				

	990 (2008) INC.		85-0098061 Page 2
Pa	t III Statement of Program Service Accompli	ishments (see instructions)	" -
1	Briefly describe the organization's mission SEE SCI	HEDULE O FOR CONTINUATION	N
	RECOGNIZING OUR ROOTS AS A MEN		JMEC PROVIDES
	RELIABLE AND AFFORDABLE POWER		
	IN PARTNERSHIPS WITH THE COMMU		
	AND COST EFFECTIVE SOLUTIONS	<u> </u>	ENERGY NEEDS OF
2	Did the organization undertake any significant program serv	vices during the year which were not listed on	
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes", describe these new services on Schedule O		
2	·		es? Yes X No
3	Did the organization cease conducting, or make significant	changes in now it conducts, any program service	es? LYes LA No
	If "Yes", describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the	organization's three largest program services b	y expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 49	947(a)(1) trusts are required to report the amoun	nt of grants and
	allocations to others, the total expenses, and revenue, if an	v, for each program service reported	
	· · · · · · · · · · · · · · · · · · ·	,, , , , , , , , , , , , , , , , , , , ,	
4a	(Code:) (Expenses \$	uncluding grants of \$	\/Payanua \$
-1 a	7 (-)	including grants of \$)(Revenue \$)
	ELECTRIC UTILITY COOPERATIVE V	WHO PROVIDES ELECTRIC SE.	RVICES TO ITS
	CUSTOMERS.		
			
		······································	
4b	(Code.) (Expenses \$	including grants of \$) (Revenue \$
			,
			
			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$
			,
			
			····
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶\$	(Must equal Part IX, Line 25, column	(B))
	<u> </u>		Form 990 (2008)

Form 990 (2008) INC.

Part IV Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	
•	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	1	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
Ū	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
Ū	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	ı	х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
3	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_x_
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	10		-22
• •	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was		- 22	
	prepared in accordance with GAAP? If "Yes," complete Schedule D. Parts XI, XII, and XIII	12	х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	- 12	X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
_	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
<u></u>	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
-	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			<u> </u>
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			T
	prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			_
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x
				

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Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

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···	

	990 (2008) INC. 85-0098	061	Р	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable 1a 77]		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	_		
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 122			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and		'	
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	- U		- -
_	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- 'B-	ļ. 	
Ū	to file Form 8282?	7c		
Ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	,		
Ū	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	7h		
_	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			}
	excess business holdings at any time during the year?			ŀ
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	8		
а	Did the organization make any taxable distributions under section 4966?	0-		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a	-	
10	Section 501(c)(7) organizations. Enter. N/A	9b		
a h		1		
11		1		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from embers or shareholders Gross income from other sources (Do not not emplicate due or paid to other sources against	1		
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them) 11b 390,738.	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	
<u>D</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	<u> </u>	000	(0000
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Form 990 (2008)

INC.

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

<u>Sec</u>	tion A. Governing Body and Management	··		
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions	-		
1a	Enter the number of voting members of the governing body 1a 10			
ь	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	Х	_
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> X</u>
<u>Sec</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		<u>X</u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13_		<u> X</u>
14	Does the organization have a written document retention and destruction policy?	14		<u> X</u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		<u>X</u>
b	Other officers or key employees of the organization?	15b		<u>X</u>
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			_
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, as	nd fina	ncial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	-	
	<u>CONNIE DORN - (505) 753-2105</u>			
	19365 STATE RD 84/285, HERNANDEZ, NM 87537			
3200 12-18-	3	Form	990 (2008

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	10			Position all that apply)			Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JOHNNY JARAMILLO						<u> </u>				
PRESIDENT	6.00	X	ļ	X		↓_		8,832.	0.	0
LEROY ORTIZ					ļ				_	
TRUSTEE	4.00	X	<u> </u>		<u> </u>	ļ		7,551.	0.	0
RALPH GARCIA			ŀ	1					_	
TRUSTEE	4.00	X	<u> </u>	ļ	<u> </u>	 		6,136.	0.	0
ROBERT MARTINEZ	4 00		İ					6 107	0	0
TRUSTEE MARIE B. PACHECO	4.00	A	├-	-	-	 		6,127.	0.	0
TREASURER	4.00	x	ļ	X	ļ			4,783.	0.	0
DENNIS P. MARTINEZ	4.00	^	-	Λ		┼─		4,703.	<u> </u>	<u> </u>
TRUSTEE AT LARGE	4.00	x	l					6,324.	0.	0
LEVI VALDEZ	4.00	-	t	<u> </u>	1	╁		0,324.		
ASSISTANT SECRETARY/TREA	3.00	$ _{\mathbf{x}}$		X				4,810.	0.	0
RICHARD VELARDE		-	 							
TRUSTEE	4.00	x	1					11,800.	0.	0
LUCAS J. CORDOVA										
SECRETARY	5.00	X	L	X				6,561.	0.	0
MANUEL GARCIA										
VICE PRESIDENT	6.00	X	<u> </u>	X	<u> </u>	L.	<u> </u>	9,806.	0.	0
DAVID SALAZAR		l			İ]				_
TRUSTEE	3.00	X	_	<u> </u>	 		<u> </u>	4,169.	0.	0
JERRY MASCARENAS	40.00				-			1		
GENERAL MANAGER	40.00			X	-	<u> </u>		104,108.	0.	8,101
		_				-				
		_	-			-	-			

Part VII Section A. Officers, Directors, Tru		nplo	oyee	s, a	nd l	High	est	Compensated Employ	rees (continued)			
(A)	(B)	ŀ			C)			(D)	(E)			F)
Name and title			Reportable			nated unt of						
	per		песк	l	tnat	app	(VI)	compensation	compensatio from related	I		her
	week	Individual trustee or director				_		the	organization	s	compe	ensation
		96 01	ste			sated		organization	(W-2/1099-MIS	3C)		n the
		trust	al tru		o) ee	ombe		(W 2/1099-MISC)			-	ization related
		wdua	Institutional trustee	Officer	Key employee	Highest compensated employee	퍝			1		izations
		Ē	lsi Isi	₽	Key	운통	Ē				·	
		L	ļ			<u> </u>						
7		ļ	<u> </u>		<u> </u>	<u> </u>						
										-		
	\	<u> </u>	 	-		}	-					
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		<u>L</u>			<u> </u>							
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		<u> </u>		<u> </u>	ļ	<u> </u>	<u> </u>	ļ				
		1										
		-	-		-	┼—	├-	<u> </u>		\longrightarrow		
	 	-		-	╁—	┼─	 		 		 -	
1b Total		ـــــ	1			┢		181,007.		0.	8	,101.
2 Total number of individuals (including those	e in 1a) who re	ceiv	ed n	nore	tha	ın \$1	00,					
compensation from the organization										<u> </u>		1
											<u> </u>	es No
3 Did the organization list any former officer,			e, ke	y er	nplo	yee,	or i	highest compensated e	mployee on		,	,
line 1a? If "Yes," complete Schedule J for s		•								. }-	3	<u> X</u>
4 For any individual listed on line 1a, is the si			-					•	the organization	-	· .	
and related organizations greater than \$15										-	4	X
5 Did any person listed on line 1a receive or the organization? If "Yes," complete Sched	•			rron	ı an	y uni	reiai	teo organization for serv	vices rendered to		5	X
Section B. Independent Contractors	idic o for ducir	perc	3011									
1 Complete this table for your five highest co	mpensated in	dep	ende	ent d	cont	ract	ors	that received more than	\$100,000 of con	npensa	tion fro	om
the organization					_					<u> </u>		_
(A)								(B)			(C)	
Name and business								Description of	services	Cc	mpens	sation
TRANSMISSION & DIST SERV									ì			
8904 WASHINGTON ST, ALBU	<u>QUERQUE</u>		MM	_8	71	<u>13</u>		CONSULTING S			187	,533.
TRACHTE INC.	DD 447	_ ^	٠.	_				CONTRACT LA	BOR		100	007
P.O. BOX 689825, MILWAUK	EE, WI	<u>53</u>	26	8			į	SERVICES	70		182	<u>,907.</u>
ALLIED TREE SERVICE	M OTESS							TREE TRIMMIN	NG		1 6 0	261
P.O BOX 351, ESPANOLA, N KUHLMAN ELECTRIC CORPORA								SERVICES			T 0 3	,261,
P.O BOX 635852, CINCINNA		45	26	3				ELECTRIC SER	RVICES		113	,130
				<u>~</u>					.,			,
2 Total number of independent contractors	including thos	e in	1) w	ho r	ece	ived	mo	re than \$100,000 in cor	npensation			

Form **990** (2008)

from the organization

	990 (85-0098	061 Page 9
Pa	rt VII	I Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$		-		
O B	<u>h</u>	Total. Add lines 1a-1f Business Code				_
Program Service Revenue		POLE RENTAL 900099	38551290. 488,806.	38551290.		488,806.
Pr.		All other program service revenue				
_		Total. Add lines 2a-2f	39040096.			-
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties	255,528.			255,528.
	6 a b c	Gross Rents Less. rental expenses Rental income or (loss) (i) Real (ii) Personal				. ;
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis			-	
	d	and sales expenses 56,882. Gain or (loss) −56,882. Net gain or (loss)	-56,882.		· · · · · · · · · · · · · · · · · · ·	-56,882.
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a Less direct expenses b	·			
8	С	Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19				
	С	Net income or (loss) from gaming activities Gross sales of inventory, less returns				
		and allowances a Less cost of goods sold b Net income or (loss) from sales of inventory			5-	
	11 a b	Miscellaneous Revenue Business Code OTHER CAPITAL CREDITS 221000	135,210.	135,210.		
	c d e	All other revenue Total. Add lines 11a-11d	135,210.			
83200 02-02	12 9 -09	Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	39373952.	38686500.	0.	687,452. Form 990 (2008)

85-0098061 Page **10**

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp		not required to compl		d (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
_	organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in				<u> </u>
2					
^	the U.S. See Part IV, line 22 Grants and other assistance to governments,				
3	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	189,108.			
6	Compensation not included above, to disqualified	105,100.			
Ü	persons (as defined under section 4958(f)(1)) and			-	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	710,030.			
8	Pension plan contributions (include section 401(k)	, 20,000			
-	and section 403(b) employer contributions)	1			
9	Other employee benefits	412,567.			······································
10	Payroll taxes	83,923.			·
11	Fees for services (non-employees)				· · · · · · · · · · · · · · · · · · ·
	Management				
b	Legal	171,329.			
c	Accounting	22,718.			
d					· · · · · · · · · · · · · · · · · · ·
e	Professional fundraising services. See Part IV, line 17		,		
f	Investment management fees				
g	Other	2,716.			
12	Advertising and promotion	_15,405.			
13	Office expenses	183,596.			
14	Information technology .				
15	Royalties				
16	Occupancy	28,632.			
17	Travel .				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,630.			
20	Interest	2,525,123.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,673,543.			
23	Insurance	57,366.			
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	DIDOUX OF OF BUROWS TOTAL	23,107,670.			
b	DICOUDING ON OND AMIONO	2,663,163.			
С	CUSTOMER ACCOUNTS EXPEN	2,169,973.			
d	DI COD TRUMTON NA TROPRIANO	1,886,457.			
е	MATRIMENTANCE CENTEDAT DIA	219,268.			
f		697,948.			
25	Total functional expenses. Add lines 1 through 24f	37,831,165.			
26	Joint Costs Check here If following				
	SOP 98-2. Complete this line only if the organization	ļ			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

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-	990 (85-0	<u>098061</u>	Pa	ge 1 1
Pai	rt X	Balance Sheet				
			(A) Beginning of year	(B) End of	year	
	1	Cash · non-interest-bearing	180. 1			80.
	2	Savings and temporary cash investments	1,076,646. 2	9,66	<u>6,6</u>	91.
	3	Pledges and grants receivable, net	3			
	4	Accounts receivable, net	4,034,298.4	4,53	7,8	09.
	5	Receivables from current and former officers, directors, trustees, key				
		employees, or other related parties. Complete Part II of Schedule L.	5			
	6	Receivables from other disqualified persons (as defined under section				
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	, -			
		Part II of Schedule L	6			
ţ	7	Notes and loans receivable, net	7			
Assets	8	Inventories for sale or use	1,797,187.8	1,85	2,9	33.
	9	Prepaid expenses and deferred charges	411,387. 9		4,9	
	10a	Land, buildings, and equipment cost basis 10a 93, 448, 951.				
	b	Less accumulated depreciation Complete	1			
		Part VI of Schedule D 10b 34,824,781.	57,023,408. 10c	58,62	4.1	70.
	11	Investments - publicly traded securities	11			
	12	Investments - other securities See Part IV, line 11	12			
	13	Investments - program-related See Part IV, line 11	375,608. 13	3,30	3.7	07
	14	Intangible assets	14		<u> </u>	
	15	Other assets. See Part IV, line 11	7,949,477. 15	7,45	2.7	31.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	72,668,191. 16	85,83		
	17	Accounts payable and accrued expenses	4,711,028. 17	5,18		
	18	Grants payable	18		<u> </u>	~ , ,
	19	Deferred revenue	166,418. 19	16	2,9	5.8
	20	Tax-exempt bond liabilities	20		<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
m	21	Escrow account liability. Complete Part IV of Schedule D	21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,				
ξ		highest compensated employees, and disqualified persons Complete Part II		•	`-	
Ë		of Schedule L	22	•		
	23	Secured mortgages and notes payable to unrelated third parties	41,624,510. 23	49,98	5 0	61
	24	Unsecured notes and loans payable	24	<u> </u>	<u>,, o</u>	<u> </u>
	25	Other liabilities Complete Part X of Schedule D	567,669. 25	53	2,5	22
	26	Total liabilities. Add lines 17 through 25	47,069,625. 26	55,86		
	20_	Organizations that follow SFAS 117, check here and complete	77,000,020. 20	22,00	= , ,	00.
w		lines 27 through 29, and lines 33 and 34.				
၁င	27	Unrestricted net assets	27			
alar	28	Temporarily restricted net assets	28			
Net Assets or Fund Balances	29	Permanently restricted net assets	29			
ŭ		Organizations that do not follow SFAS 117, check here X and	, , ,			
ᅩ		complete lines 30 through 34.	1.			
ts o	30	Capital stock or trust principal, or current funds	0.30			0
sse	31	Paid-in or capital surplus, or land, building, or equipment fund	105,710. 31	1.0	5,6	
ţ	32	Retained earnings, endowment, accumulated income, or other funds	25,492,856. 32	29,86		
Š	33	Total net assets or fund balances		29,86		
	l	·	70 550 404			
Pai	rt XI	Total liabilities and net assets/fund balances Financial Statements and Reporting	72,668,191. 34	85,83	3,1	.00
<u> </u>		Trinancial Statements and Reporting			Yes	No
_	A = = =	ounting method used to prepare the Form 990 Cash X Accrual	T out		,,,,	
1			Other			١,,
2a		e the organization's financial statements compiled or reviewed by an independent	accountant?	_2a	37	X
b		e the organization's financial statements audited by an independent accountant?		2b	X	
С		es" to lines 2a or 2b, does the organization have a committee that assumes respo	•		,.	}
_		ew, or compilation of its financial statements and selection of an independent acco		_2c	X	+
За		result of a federal award, was the organization required to undergo an audit or au	idits as set forth in the Single Audi			
_		and OMB Circular A-133?		3a		X
b	If "Yo	es," did the organization undergo the required audit or audits?		3b	l	L

832011 12-18-08

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Inspection

JEMEZ MOUNTAINS ELECTRIC COOPERATIVE, Name of the organization INC.

Employer identification number 85-0098061

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accou	Ints. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin			
_		(a) Donor advised funds	(b) Fur	ids and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may be	e used only	
	for charitable purposes and not for the benefit of the donor of	or donor advisor or other impermissible pr	vate benefit	Yes No
Pai	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, I	Part IV, line 7	
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)		
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an his	storically imp	ortant land area
	Protection of natural habitat	Preservation of certif	ied historic st	tructure
	Preservation of open space			
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a con	servation eas	sement on the last day
	of the tax year		,	,
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements .		. _2 b	
c	Number of conservation easements on a certified historic sti	ructure included in (a)	. 2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06	. 2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organizatio	n during the taxable
	year >			
4	Number of states where property subject to conservation ea	sement is located >		
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, violations, a	ınd	-
	enforcement of the conservation easements it holds?			Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	and enforcing easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing easements during the year > \$	S	
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170)(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	e statement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	the organiza	tion's accounting for
	conservation easements			
Pa	rt III Organizations Maintaining Collections of	•	Other Simi	lar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and b	alance sheet	works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service,	provide, in Part XIV, the text of
	the footnote to its financial statements that describes these			
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balar	nce sheet wo	rks of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the	e following amounts relating to
	these items:			
	(i) Revenues included in Form 990, Part VIII, line 1		>	\$
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provid	de
	the following amounts required to be reported under SFAS 1	116 relating to these items		
а	Revenues included in Form 990, Part VIII, line 1	· · ·		\$
þ	Assets included in Form 990, Part X		•	\$
LHA	For Privacy Act and Paperwork Reduction Act Notice, se	e the Instructions for Form 990.		Schedule D (Form 990) 2008

	dule D (Form 990) 2008 INC.		-						98061	
Par	·									
3	Using the organization's accession and other	r records, check any	y of the f	ollowing tha	it are a signif	icant us	e of its co	ollection ite	ems (check a	all
	that apply)									
а	Public exhibition	C	ı 🗀	Loan or exc	hange progr	ams				
b	Scholarly research	•		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organizati	on's exe	empt pur	oose in Pa	rt XIV	
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	er sımıla	ır assets			
	to be sold to raise funds rather than to be m						_		Yes	☐ No
Par	t IV Trust, Escrow and Custodia					ered "Ye	s" to For	m 990. Pa	rt IV. line 9.	or
	reported an amount on Form 990, Pa		•	· ·				·		
	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other as	sets no	t include	 d		
	on Form 990, Part X?								Yes	☐ No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	nnwolle	table				_		
	Too, explain the analysmonth of areas	and complete the n	ono ming	table.				T	Amount	
С	Beginning balance						10	 	7 WITOGITE	
٦	Additions during the year		•	•			1d	 		
u	Distributions during the year									
4	Ending balance					•	1e			
f n-	Did the organization include an amount on F	Corm OOO Dort V line	212	•	•				Yes	No No
	, 3		3217					<u>. </u>	res	L NO
Par	t V Endowment Funds. Complete		orod "Va	o" to Form (000 Dod IV	lino 10				
1 41	Endownent runds. Complete	T					(D Th			ava baalı
_	On the second se	(a) Current year	(0) -	Prior year	(c) Two yea	rs dack	(a) Three	years back	(e) Four ye	ars back
1a	Beginning of year balance			-	 	· · ·	**		1.	
b	Contributions		-					· ;		
С	Investment earnings or losses	<u> </u>	· 'e`;		<u> </u>	<u> </u>	1, 1,	- , -	<u> </u>	
d	Grants or scholarships		-		 ` 	-, ;	·		<u> </u>	 · ·
е	Other expenditures for facilities		, `			′ -	-			
	and programs				 				 	
f	Administrative expenses				<u> </u>	<u> </u>	·	` - ·	<u> </u>	
g	End of year balance		<u> </u>	-	<u> -</u>			<u>-</u>	<u> </u>	
2	Provide the estimated percentage of the year	ar end balance held	as.							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment	_%								
За	Are there endowment funds not in the posse	ession of the organiz	zation th	at are held a	and administe	ered for	the orgar	nization		
	by								<u> </u>	es No
	(i) unrelated organizations .	• •							3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	•							3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Investments - Land, Buildin	gs, and Equipm	ient. Se	ee Form 990), Part X, line	10.				
	Description of investment	(a) Cost or obasis (invest		1 ' '	t or other (other)	(c) [Depreciat	ion	(d) Book v	⁄alue
1a	Land			16	52,234.				162	,234.
b	Buildings				9,480.	34.	671,	035.	58,238	
c	Leasehold improvements									
ď	Equipment			37	77,237.		153,	746	223	,491.
	Other			<u> </u>						<u>, </u>
	I. Add lines 1a-1e (Column (d) should equal F	form 990 Part X col	umn (B)	line 10(c) 1					58,624	170.
1010	i	J. J. J. J. J. J. J. J. J. J. J. J. J. J	ر(د) <u>۱۱۱۱ (۱۲),</u>	ie 10[0].)					<u> </u>	<u>, </u>

Schedule D (Form 990) 2008

Total (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶

| Part IX | Other Assets. See Form 990, Part X, line 15.

 (a) Description
 (b) Book value

 REGULATORY ASSETS
 6,696,929.

 DEFERRED DEBITS
 755,802.

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)

Part X Other Liabilities. See Form 990, Part X, line 25

(a) Description of liability (b) Amount

Federal income taxes

DEFERRED CREDITS 532, 522.

Total. (Column (b) should equal Form 990, Part X, col (B) line 25)

532, 522.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

832053 12-23-08

Schedule D (Form 990) 2008

Sche	dule D`(Form 990) 2008 INC			85-	0098061	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Fir	nancial State	ements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		39,373	952.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		37,831	
	Excess or (deficit) for the year Subtract line 2 from line 1		3		1,542	
3			4		1,042	707.
4	Net unrealized gains (losses) on investments					
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8		2,827	
9	Total adjustments (net). Add lines 4-8		9		2,827	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		4,370	<u>,234.</u>
Par	t XII Reconciliation of Revenue per Audited Financial Statements	s With Rever	nue per R	eturr	า _	
1	Total revenue, gains, and other support per audited financial statements			1	42,258	,296.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				_	
а		2a		l i		
- L	Ť T	2b	 .			
	· · · ·	2c				
C			7,462.			
d	· · · · · · · · · · · · · · · · · · ·	2d 2,82	1,404.		2 027	160
е	Add lines 2a through 2d			_2e	2,827	,404.
3	Subtract line 2e from line 1			_3	39,430	<u>,834.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	İ				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b -5	6,882.			
С	Add lines 4a and 4b			4c	-56	<u>,882.</u>
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	39,373	,952.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statement	ts With Expe	nses per	Retu	ırn	
1	Total expenses and losses per audited financial statements			1	37,888	.047.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		•			
_	1	22				
a		2a		1		
b		2b		1		
С		2c		-		
d	-	2d		-		•
е	Add lines 2a through 2d			_2e		0.
3	Subtract line 2e from line 1			3	37,888	<u>,047.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]		
b	Other (Describe in Part XIV)	4b -5	6,882.			
С	Add lines 4a and 4b			4c	-56	,882.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	37,831	,165.
Pa	t XIV Supplemental Information				•	
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	nes 1a and 4 Pa	art IV lines 1	h and	2h Part V line	4 Part
	rt XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	100 14 4114 1,11	111 14, 111100 1	D 4.10	25,1 411 1, 1110	1, 1 W.
Λ, Γα	TEXT, line 0, Fate XII, lines 20 and 4b, and Fate XIII, lines 20 and 4b					
D 3 1	AM AT I TAID O OMITTO AD TITOMADAMO.					
PAI	RT XI, LINE 8 - OTHER ADJUSTMENTS:					
$\underline{\mathbf{AL}}$	OCATED COOPERATIVE MARGINS: 2827462.					
DE	CREASE IN MEMBERSHIP CAPITAL FROM PRIOR YEAR	R: -15.			_	
וגכ	RT XII, LINE 2D - OTHER ADJUSTMENTS:		,			
<u>. w</u>	CI LLL, DIGHT DD OTHER ADDOUGHENTS.					
ът.	OCAMBO COODEDAMINE MARCING. 2027462					
AL.	LOCATED COOPERATIVE MARGINS: 2827462.					

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Schedule D (Form 990) 2008 Part XIV Supplemental Info	INC.	
- ait / Supplemental info	rmation (continued)	
DADE VIT I THE AD _	OTHER ADJUSTMENTS:	
PART ALL, DINE 4B	- OTHER ADOUGIMENTS.	
TARR ON DIRECTOR TO	ROPERTY: -56882.	
HOSS ON DISPOSAL FR	ROPERTI: -30002:	
DADT YTTT T.TMF /B	- OTHER_ADJUSTMENTS:	
FART ATTE, DINE 4B	OTHER ADOUDTHENTS.	
TINGS ON DISDOSAL DE	ROPERTY: -56882.	
HODD ON PIBLOBILE IN	KOT EKTT: 50002:	
		
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SCHEDULE O

(Form, 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

JEMEZ MOUNTAINS ELECTRIC COOPERATIVE, INC.

Employer identification number 85-0098061

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ALL OUR MEMBERS AND CONSUMERS. WE TAKE AN ACTIVE ROLE IN OUR
COMMUNITIES BY WORKING TOGETHER AT THE GRASSROOTS LEVEL TO ENSURE THE
POSITIVE WELFARE AND DEVELOPMENT OF OUR COMMUNITIES.
FORM 990, PART VI, SECTION A, LINE 6: PER THE ORGANIZATIONS BYLAWS,
MEMBERSHIP CONSISTS OF ANY PERSON, FIRM, ASSOCIATION, CORPORATION, OR BODY
POLITIC OR SUBDIVISION THEREOF MAY BECOME A MEMBER.
FORM 990, PART VI, SECTION A, LINE 7A: EACH MEMBER SHALL BE ENTITLED TO
ONLY ONE VOTE UPON EACH MATTER SUBMITTED TO A VOTE AT THE MEETING OF THE
MEMBERS. ALL QUESTIONS SHALL BE DECIDED BY A VOTE OF THE MAJORITY OF THE
MEMBERS. THE TRUSTEES SHALL BE ELECTED BY THE MEMBERS AT EVERY QUADRENNIAL
DISTRICT MEETING.
FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS VOTE ON CHANGES TO THE BY-LAWS, ELECT THE TRUSTEE IN THEIR DISTRICT AND VOTE TO UNSEAT A TRUSTEE.
FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY THE
CHIEF FINANCIAL OFFICER AND GENERAL MANAGER. IT IS THEN PRESENTED TO THE
FINANCE COMMITTEE FOR APPROVAL. AFTER APPROVAL, IT IS PRESENTED TO THE
BOARD OF TRUSTEES.
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUIRES
EMPLOYEES TO INFORM THEIR SUPERVISOR OR GENERAL MANAGER OF ANY
RELATIONSHIPS THAT MAY CAUSE A CONFLICT AS SOON AS POSSIBLE.
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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Name of the organization

JEMEZ MOUNTAINS ELECTRIC COOPERATIVE, INC.

Employer identification number 85-0098061

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES ITS FORM
1023 AND 990 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.
THE FOLLOWING SPECIFIC CHANGES HAVE BEEN MADE ON THIS AMENDED FORM 990.
FORM 990, PART III HAS BEEN UPDATED TO INCLUDE THE ORGANIZATIONS
MISSION AND PROGRAM SERVICE STATEMENT.
FORM 990, PARTS IV - VI, ANSWERS TO SOME QUESTIONS HAVE BEEN CHANGED TO
PROPERLY REFLECT THE CORRECT RESPONSE.
FORM 990, PART VII HAS BEEN UPDATED TO REFLECT ALL OFFICERS AND
TRUSTEES TITLE, SALARIES AND COMPENSATION.
FORM 990, PART VIII HAS BEEN AMENDED TO MORE ACCURATELY REFLECT TOTAL
INCOME.
FORM 990, PART IX HAS BEEN AMENDED TO MORE ACCURATELY REFLECT TOTAL
EXPENSE.
FORM 990, PART X HAS BEEN AMENDED TO MORE ACCURATELY REFLECT THE
BALANCE SHEET AS PORTRAYED ON THE AUDITED FINANCIAL STATEMENTS.
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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2008
Open to Public Inspection

Name of the organization	JEMEZ INC.	MOUNTAINS	ELECTR:	IC (COOPERATI	/Е,	Employer identificate 85-0098063	ion number
FORM 990, SCHED	ULE D F	IAS BEEN]	NCLUDED	IN	THIS AMEN	IDED RET	URN.	
FORM 990, SCHED	ULED O	HAS BEEN	UPDATED	TO	PROPERLY	REFLECT	RESPONSES	то
SPECIFIC QUESTION	ONS.						4	-11-
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 12-18-08

Schedule O (Form 990) 2008